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SERIAL NUMBER 09/631,723	FILING DATE 08/03/2000  RULE	CLASS 710	GROUP ART UNIT 2112	ATTORNEY DOCKET NO. AUS9-2000-0316- US1
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

NONE  
COR

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

NONE  
COR

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/20/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 5	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

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## TITLE

Permanent open firmware PCI host bridge (PHB) unit addressing to support dynamic memory mapping and swapping of I/O drawers

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees ( Filing )



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<b>APPLICANTS</b> Richard Louis Arndt, Austin, TX ; Tam D. Bui, Austin, TX ; Van Hoa Lee, Cedar Park, TX ; David Lee Randall, Leander, TX ; Kiet Anh Tran, Cedar Park, TX ; David R. Willoughby, Austin, TX ;				
<b>** CONTINUING DATA *****</b> <i>NONE CEC</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>NONE CEC</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/20/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>CEC</i>		<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 21
Verified and Acknowledged Examiner's Signature <i>CEC</i> Initials		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> Duke W Yee Carstens Yee & Cahoon LLP P O Box 802334 Dallas ,TX 75380				
<b>TITLE</b> Permanent open firmware PCI host bridge (PHB) unit addressing to support dynamic memory mapping and swapping of I/O drawers				
<b>FILING FEE RECEIVED</b> 708	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	